PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/763,309			ing Date 07/2001	To be Mailed	
	Al	D – PART I	SMALL ENTITY			OTHER THAN OR SMALL ENTITY						
Т	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1 16(o), (p),		N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(ii)		minus 20 =		•		X \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =				X \$ =		1	X \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 s	er, the application for small ent sheets or fraction	wings exceed 100 ation size fee due ity) for each ction thereof. See 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j))]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	04/29/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	- 28	Minus	20	= 8		x \$ =		OR	X \$50=	400	
	Independent (37 CFR 1,16(h))	· 2	Minus	3	- 0		X \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1:16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	400	
(Column 1) (Column 2) (Column 3)												
∃NT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.160))		Minus	**	=	1	X \$ =		OR	x s =		
N	Independent (37 CFR 1.16(h))		Minus	***	-		X \$ =		OR	X \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))]			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))					1			OR			
* If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							natrumant C	OR	TOTAL ADD'L FEE		
***	I the entity in column 1 is see than the entity in column 2, white 0 in column 3. Legal Instrument Examiner; "#the "#ighted Hambert Proviously Paid For If N THIS SPACE is less than 3, enter "3". "If the "Hightest Number Proviously Paid For If N THIS SPACE is less than 3, enter "3". The "Hightest Number Proviously Paid For If (Total in Independent) is the hightest number found in the appropriate box in column 1.											

The considered of information is equilibred, by the first of the considered of the c ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.